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A. But that is different.

C. How so?

A. Well now, if a bricklayer, who lays so many bricks per hour, lost ten minutes, so many bricks would not be laid.

C. A nurse does not lay bricks, but her time is as valuable to her, as anyone else's time is to him.

A. It never has been that way.

C. It has never been recognized as "that way," but it will have to be, in the future, because nurses cannot live on ideals in this day and age.

PSYCHIATRY FOR THE STUDENT NURSE

BY CHRISTINE BEEBE

New York, N. Y.

In reading the current articles in the mental hygiene magazines of to-day, one is struck by the fact that so much stress is put upon the subject of special training in Psychiatry for social workers and so little is said about the training of the student nurse in this branch which would seem to be as necessary to her equipment as any other single branch of training.

No training school would consider the omission of a course in obstetrics, yet class after class is graduated which has heard scarcely a lecture on mental disease and with no special experience with psychiatric cases.

Of course the nurse meets the mental and nervous element in every case of physical disease or injury with which she comes in contact, but never having been taught to recognize this element, its significance escapes her. She pushes aside all consideration of the mental complication of a fracture, for instance,—which is there, even if it is not noticed by the untrained person. The mental derangement should be reckoned with, if the personality of the patient is to be given its just due. If his mood changes, which he can control no easier than he can control the rise of his temperature, it is felt by the nurse to be an expression of his normal mind. She disapproves and becomes irritated; in spite of her efforts to the contrary, she shows it, and a disastrous antagonism grows between them.

If this is true in a fracture case, how much more important the psychiatric viewpoint becomes, in caring for a case characterized by fever, where the physical and the mental play about equal parts. Many tragedies occur through the carelessness of nurses who, by lack of constant watchfulness, do not make it impossible for their patients to get out of bed and wander about in the cold with perhaps

fatal results, or worse yet, come to harm by more violent methods. Perhaps it is unkind to call this failure in preparedness, carelessness, when it happens because the nurse has not been taught that the psychosis is there, even if the patient is not actively delirious, and to foresee its possibilities and recognize its earliest signs. Innumerable catastrophes could be prevented if nurses knew the importance and value of realizing that there can be no physical disturbance without its mental complement.

The Army School students have had exceptional opportunities in many ways, their course was elaborately planned and many new ideas have been incorporated in it. Throughout, the public health ideal has been held before them and, as public health and mental hygiene go hand in hand, they are given three months' affiliation with a hospital for nervous and mental cases. While the Army itself has much work of this kind, it is easily seen that a more intimate knowledge may be gained while caring for women, and the teaching facilities are better in a specialized institution with a long established training school.

This innovation in the training of the student nurse was received with anything but enthusiasm in Army hospital circles. The students themselves were plainly frightened. For most people unfamiliar with mental disease, it is the most horrible thing imaginable, and our fear and repulsion, which most of us tried valiantly to mask, were increased by the consternation rife among our already much-tried relatives. Then the idea was scoffed at by most of the medical officers with whom we came in contact, while the graduate nurses appeared actually incensed at this additional course which nurses always have been able to do without.

The general trend of thought seemed to be that mental cases required nothing more than custodial care, that the trained nurse had no scope in this direction, and undoubtedly if the course had been optional, as it is in some training schools, many students would have been influenced by this common attitude to avoid it. Fortunately it was not optional, and we began on general principles to defend the stand our school had taken, but nevertheless we quaked inwardly and being among the first to affiliate, we had no support from our own kind.

Our group was particularly blessed in the hospital chosen for them. Perhaps we might not have been as enthusiastic over another institution, for where we expected to find rigid restrictions, we found a most delightful atmosphere of confidence and helpfulness; and where we expected tension, we found calmness, poise, and a hearty welcome from doctors and supervising nurses, who had had Army

experience and who understood our particular make-up and were interested in the aims and welfare of our school. Their first thought has been to give us every benefit to be derived from psychiatric training and we have never felt for one moment that we were simply caring for the physical comfort of unfortunate, incurable, insane patients.

The idea of the possibility of cure was thoroughly instilled, and we are taught to work as systematically along one course of treatment with as definite an aim in view, as we ever were on a surgical case. We have found our lectures intensely interesting and helpful and we have enjoyed our classes more than those in any other branch of training.

The instruction has given us an insight into many cases that were a source of bewilderment in our former experience and has opened our eyes to the sad fact that we wrought actual injury to many nervous cases that we encountered in medical or surgical work. We petted and coddled when we should have been firm, and we called the medical officers hard and tried to make up to the boys in attention, what we foolishly considered harshness on the part of the doctors. We failed entirely to get the right point of view and exhausted ourselves in endeavoring to satisfy, where satisfaction was an impossible thing, and in the end lost all patience and did not show consideration enough, perhaps. Many a wounded soldier has been permanently "spoiled" by being indulged in his neurasthenic proclivities by nurses who saw only that the patient was a hero of the war and, therefore, must have the very best; in her ignorance she failed to comprehend that the best in such conditions is an understanding of the case, the ability to carry out the treatment prescribed.

Our grasp of mental disease as a whole has been completely changed. Like most people who know nothing about psychoses, we covered our dread of this thing with a laugh and looked upon these patients, not as sick, but as absurdities to be hidden away behind walls and forgotten as much as possible. It was with nothing less than a shock that we came to see that as a rule they are above the average in intellect, and we found ourselves among a cultured class of people, many of them with considerable social background and a record of accomplishment.

The management of these people, so clever in many ways, requires the utmost tact, and we have received an intensive training in this art, so vitally necessary to the nurse. Truthfulness is absolutely required by the policy of the staff, and still we are expected to keep our patients in as amiable a frame of mind as possible while maintaining the necessary discipline of the routine prescribed for them.

It teaches us to make rapid mental adjustments, to act quickly,

to be firm in our decisions and, what is decidedly important, to keep our own emotions under good control.

Physical hygiene was among the first subjects presented to us when we entered training, but we were allowed to shift for ourselves as far as mental health was concerned. A sound physical condition and the various activities of the war workers helped to compensate for this lack, but we realize now that many a large looming, little difficulty might have been smoothed over, that the unaccustomed discipline would have been more easily assimilated, if we had been taught earlier the principles of mental hygiene. The probationer usually understands that she must face the necessary unpleasant things of hospital life, but the sudden presentation of the cruelty and sordidness of life in general, which comes through the intimate contact with patients whose environment has been bad, is often staggering and she is unable to adjust her ideas. She becomes confused and worried and, often somewhat over tired physically, she gives up the struggle and goes back to surroundings where one is not required to adopt an entirely new method of thought. Many a fine potential nurse gives up training because of the difficulty of this mental adjustment and here we have another reason for the increasing thinness of our ranks.

The second and third year nurses do not realize that their flippancy and assumed hardness produce a disastrous effect upon the beginner, who mistakes the broader outlook upon prevailing conditions as wicked tolerance. If the senior nurse stresses this leniency beyond a certain limit, she throws the new student into a sort of mental panic; she is afraid to accept these exaggerated ideas, and she drops out of the training school.

The strenuous day's work is so apt to take away all inclination to play that nurses give up trying to get away from their work. Instead they talk it over unceasingly, they dwell upon its hardships, they spend their evenings recounting all its trials and difficulties, enumerating every detail, working themselves into a state of self pity and bitterness and fault finding, little realizing the mental processes involved or their ultimate effects.

During our course in Psychiatry we have been taught the necessity of play and many ways of playing. Care has been taken in teaching us various social accomplishments, in getting us interested in sports of many kinds, and in making us understand how necessary these things are to health. We are taught to interest patients in games and we cannot overestimate the value of this branch both to ourselves and to our patients of the future.

As an all around balancing factor, we feel that our course in

psychiatry has been a wonderful success. It has taught us that some mental deviation from normal accompanies every form of physical ailment, that it must be studied and met as intelligently as possible, and that we do untold harm when we ignore it. We have had many opportunities to observe skillful handling of trying situations, we have seen the quick effect of the right word spoken at the proper moment, and we trust we have been able to acquire, if only to a limited degree, a little of the valued art of tactfulness which we have seen used with such success by the specialists in this branch of our profession. We are satisfied that our training has been rounded out, we feel a little more sure of ourselves in many ways, we have gained numerous interests, and we have learned a deep respect for psychiatrists and the work they are engaged in. We hope that nurses are not going to hand over all of this interesting service with its promising future, to the social worker. It holds fully as much for us as for them and we, who have had this exceptional opportunity, hope to spread our enthusiasm among the students in training schools where the course in psychiatry is optional or not included at present in the curriculum.

HEALTH SUPERVISION IN PUBLIC SCHOOLS¹

BY EULA G. CHRISTIAN, R.N.

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The recently-elected, one-armed, president of Mexico, General Obregon, rightly sensed the spirit of the times when he made the statement that he would rather teach the Mexican people to use the tooth brush than to handle the gun. When we find, right here, in our own wonderful United States, that out of a room full of tots, only half a dozen have perfect teeth, we know that he was right.

"Every child has a right to be as healthy as present knowledge can make him," the Bureau of Education tells us, but it is a problem of psychology to decide that force is not to be used in the process of his becoming healthy. How we would like to take the child out of his present environment and mold him to our liking, for we grow to love the children, and it is hard to wait for the slow process of evolution, to gain the desired end and solve the problem of their future. We have patterned our method for the teaching of health habits on the method used by the greatest teacher the world has ever known, the Christ. He only offered to the world, sin sick and soul sick, as He knew it to be, the ideas and ideals of religious life, and though He portrayed the

¹ Read at a meeting of the Indiana State Nurses' Association, Indianapolis, October, 1920.